COVID-19 Infection Prevention and Control: Guidance for Test Collection & Assessment Centres
March 9, 2021

Test collection and assessment centres can be stand-alone clinics, outdoor drive-through centres, and/or combined with urgent and primary care centres or other clinic spaces.

Refer to the COVID-19 testing information on the BC Centre for Disease Control’s (BCCDC) website for more information on who should be tested, as well as procedures for specimen test collection and labelling.

On discharge and when indicated, provide patients with self-Isolation after a COVID-19 test information and other patient education materials.

Set-up for a test collection and assessment centre
Primary care, urgent and primary care centres and other office-based settings

- Establish points of entry and create a one-way flow of patients into the test collection and assessment centre with physical distancing markers and signage.
- Minimize the number of people gathering in waiting rooms inside the centre:
  - For example, determine the maximum number of people for centres, which provide services for both COVID-19 testing and other medical care.
  - Post signage about the number of people who can be at the site.
  - Stagger appointment times for patients coming in for COVID-19 testing and assessment. Consider providing separate entrances and clinic rooms for them.
  - Ask people to wait in their car or outside the clinic until it is their turn.
- Use cleanable physical barriers where physical distancing cannot be maintained, for example:
  - Consider clear partitions at reception counters or throughout waiting areas.
  - Have enclosed treatment rooms or cleanable dividers (e.g. wipeable privacy screens) between patient assessment and treatment areas.
- Hand hygiene stations, including alcohol-based hand rub (ABHR) containing at least 70% alcohol and/or hand hygiene sinks with soap and water, at the entrance and exit of the clinic.
- Provide medical masks for patients and visitors entering the clinic. Under the Ministry of Health’s policy for Mask Use in Health Care Facilities During the COVID-19 Pandemic, all patients and visitors must wear medical masks when entering and moving around a health-care facility.
- Post signage for hand hygiene, how to wear a mask, physical distancing, and other infection and exposure control measures inside the facility.
• Ensure appropriate cleaning and disinfection supplies are available for use, as outlined in the provincial environmental cleaning and disinfectants for clinic settings poster.

Outdoor test collection and assessment settings

• Establish hand hygiene stations, including ABHR containing at least 70% alcohol and/or hand hygiene sinks with soap and water, at the point of test collection and assessment.
• Create covered test collection areas (e.g., pop-up tents) to protect health-care workers from the weather and prevent personal protective equipment (PPE) and supplies from getting wet. Covering the collection area on multiple sides is recommended to provide maximum coverage during inclement weather.
• Establish alternatives (e.g. indoor clinic spaces or covered trailers) to outdoor testing during cold or inclement weather, whenever possible. Implement appropriate measures to address prolonged outdoor cold environments.
• Refer to your regional health authority for specific heat and cold stress guidance or the Canadian Centre for Occupational Health and Safety: Cold Environments – Working in the Cold webpage for more information.

Infection prevention and control procedure recommendations

Primary care, urgent and primary care centres and other office-based settings

• For patients entering the clinic, provide them with a medical mask and ask them to perform hand hygiene using ABHR or soap and water at clinic entrances.
• Health-care workers who have close contact, within 2-metres, with patients with confirmed and/or suspected COVID-19 must wear PPE including medical mask, eye protection, gloves and gown or coveralls.
  o Refer to the BCCDC’s PPE webpage for information on how to don and doff PPE.
  o Follow droplet and contact precautions for all direct contact with patients presenting for COVID-19 testing and/or assessment.
  o Extend the use of PPE unless it becomes damaged or visibly soiled. Properly doff PPE, and either dispose (if disposable) or clean and disinfect (if reusable) the PPE, when leaving the patient care area. For example, going into clean supply rooms, at the end of shift or during break/mealtimes.
  o Gloves must be changed and rigorous hand hygiene must be performed between each patient.
  o Use a N95 respirator or equivalent instead of medical mask when performing aerosol generating medical procedures (AGMP) for patients with suspected or confirmed COVID-19. Specimen collection, via nasopharyngeal swab or gargle test, is not considered AGMP.

• Perform hand hygiene:
  o Before and after contact with a patient or the patient care environment;
  o Before and after breaks;
  o Before clean or sterile procedures;
  o After possible exposure to body fluid;
  o Before donning PPE; and,
  o In between each step when doffing PPE.

• Additional gear options (e.g., high visibility vests) and layered clothing:
  o Select additional gear options that minimize the risk of self-contamination and do not require removal over the head. Care must be taken to avoid self-contamination when taking off additional gear.
- Additional clothing for warmth must be worn underneath PPE.
- Additional gear should be doffed before removing PPE.
- Perform hand hygiene immediately after removing additional gear.
- Additional gear worn on top of PPE should be cleaned and disinfected or laundered after each use. Follow manufacturer’s instructions for cleaning/disinfecting or laundering.

- Follow provincial [environmental cleaning and disinfectants for clinic settings](http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/clinical-care/community-based-health-care) guidance to clean and disinfect surfaces and reusable shared equipment.

**References:**


**Acknowledgement:**

This document was developed by the Provincial Infection Control Network (PICNet) of BC in consultation with the Infection Prevention and Control/Workplace Health and Safety Provincial Working Group.